

John R. Ashcroft Secretary of State
 2023-2024 BIENNIAL REGISTRATION REPORT
 BUSINESS

I00151768
Date Filed: 2/3/2023
John R. Ashcroft
Missouri Secretary of State

I ELECT TO FILE A BIENNIAL REGISTRATION REPORT

* SECTION 1, 3 & 4 ARE REQUIRED

REPORT DUE BY:	<u>4/30/2023</u>
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I00151768
 ARCH INSURANCE COMPANY
 CSC-LAWYERS INCORPORATING SERVICE COMPANY
 221 BOLIVAR ST
 JEFFERSON CITY MO 65101

RENEWAL MONTH: JANUARY
<input type="checkbox"/> I OPT TO CHANGE THE CORPORATION'S RENEWAL MONTH TO FOR A \$25.00 FEE
PRINCIPAL PLACE OF BUSINESS OR CORPORATE HEADQUARTERS: *
1 2345 Grand Blvd (Required)
Suite 900
STREET
Kansas City MO 64108-2619
CITY / STATE ZIP

If changing the registered agent and/or registered office address, please check the appropriate box(es) and fill in the necessary information.
<input type="checkbox"/> The new registered agent _____ IF CHANGING THE REGISTERED AGENT, AN ORIGINAL WRITTEN CONSENT FROM THE NEW REGISTERED AGENT MUST BE ATTACHED AND FILED WITH THIS REGISTRATION REPORT.
<input type="checkbox"/> The new registered office address _____
Must be a Missouri address, PO Box alone is not acceptable. This section is not applicable for Banks, Trusts and Foreign Insurance.

NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). <u>MUST LIST PRESIDENT AND SECRETARY BELOW</u>	A	NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). <u>MUST LIST AT LEAST ONE DIRECTOR BELOW</u>	B
<u>PRESIDENT</u> First, Brian D STREET 185 Asylum Street, CityPlace II, 16th Floor CITY/STATE/ZIP Hartford CT 06103		<u>NAME</u> First, Brian D STREET 185 Asylum Street CITY/STATE/ZIP CityPlace II, 16th Fl Hartford CT 06103	
<u>SECRETARY</u> Shulman, Regan A STREET 210 Hudson Street, Suite 300 CITY/STATE/ZIP Jersey City NJ 07311		<u>NAME</u> Nails, Patrick K STREET Harborside 3, 210 Hudson Street CITY/STATE/ZIP Suite 300 Jersey City NJ 07311	
<u>TREASURER</u> Ahern, Thomas J STREET Harborside 3, 210 Hudson Street CITY/STATE/ZIP Suite 300 Jersey City NJ 07311		<u>NAME</u> Ahern, Thomas J STREET Harborside 3, 210 Hudson Street CITY/STATE/ZIP Suite 300 Jersey City NJ 07311	
<u>ASSISTANT SECRETARY</u> Gilligan, Melissa B STREET 185 Asylum St CITY/STATE/ZIP CityPlace II, 16th Floor Hartford CT 06103		<u>NAME</u> STREET CITY/STATE/ZIP	
NAMES AND ADDRESSES OF ALL OTHER OFFICERS AND DIRECTORS ARE ATTACHED			

The undersigned understands that false statements made in this report are punishable for the crime of making a false declaration under Section 575.060 RSMo. Photocopy or stamped signature not acceptable.	*
4 Authorized party or officer sign here	Barbara A Lee (Required)
Please print name and title of signer:	Barbara A Lee / Other NAME TITLE

REGISTRATION REPORT FEE IS:
<input type="checkbox"/> \$40.00 If filed on or before 4/30/2023
<input type="checkbox"/> \$55.00 If filed on or before 5/31/2023
<input type="checkbox"/> \$70.00 If filed on or before 6/30/2023
<input type="checkbox"/> \$85.00 If filed on or before 7/31/2023
ADD AN ADDITIONAL \$25.00 FEE IF CHANGING THE RENEWAL MONTH.

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW
 IT WILL BECOME A PUBLIC DOCUMENT AND ALL INFORMATION
 PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE

E-MAIL ADDRESS (OPTIONAL): blowe@archinsurance.com

REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED
 RETURN COMPLETED REGISTRATION REPORT AND PAYMENT TO: Secretary of State, P.O. Box 778, Jefferson City, MO 65102

EXHIBIT C

**John R. Ashcroft Secretary of State
2023-2024 BIENNIAL REGISTRATION REPORT**

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ARCH INSURANCE COMPANY
CSC-LAWYERS INCORPORATING SERVICE COMPANY
221 BOLIVAR ST
JEFFERSON CITY MO 65101

OFFICERS (Continued)		BOARD OF DIRECTORS (Continued)
NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE).		NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE).
<u>CFO</u>	Ahern, Thomas J	<u>DIR.</u>
STREET	Harborside 3, 210 Hudson Street Suite 300	STREET
CITY/STATE/ZIP	Jersey City NJ 07311	CITY/STATE/ZIP
3		
<u>OTHER</u>	Gilligan, Melissa B	
STREET	185 Asylum Street, CityPlace II 16th Floor	
CITY/STATE/ZIP	Hartford CT 06103	

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